

FINANCIAL AFFIDAVITCJA 23
(Rev. 5/98)

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN UNITED STATES
HE CASE OF MAGISTRATE DISTRICT APPEALS COURT OR OTHER PANEL (Specify below)

VS. _____

FOR

AT

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

Sean Stark

CHARGE/OFFENSE (describe if applicable & check box →) Felony Misdemeanor

- Defendant - Adult
- Defendant - Juvenile
- Appellant
- Probation Violator
- Parole Violator
- Habeas Petitioner
- 2255 Petitioner
- Material Witness
- Other (Specify) _____

DOCKET NUMBERS	
Magistrate	
03m-1150-J68	
District Court	
Court of Appeals	

EMPLOY- MENT	Are you now employed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Am Self Employed		
	Name and address of employer: <u>Patio pools & Spas</u>		
	IF YES, how much do you earn per month? \$ <u>1680.</u>	IF NO, give month and year of last employment	
How much did you earn per month? \$ _____			
OTHER INCOME ETS	If married is your Spouse employed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	IF YES, how much does your Spouse earn per month? \$ <u>1500</u>	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____	
	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
CASH	RECEIVED		
	RECEIVED & IDENTIFY \$ _____		
	THE SOURCES _____		
PROP- ERTY	IF YES, GIVE THE AMOUNT _____		
	RECEIVED & IDENTIFY \$ _____		
	THE SOURCES _____		
DEBT S & CREDITS EBTS	Have you any cash on hand or money in savings or checking account? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ <u>500</u>		
	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	IF YES, GIVE THE VALUE AND \$ _____	VALUE	DESCRIPTION
DESCRIBE IT _____			
DEPENDENTS	MARITAL STATUS		
	<input type="checkbox"/> SINGLE	Total No. of Dependents	List persons you actually support and your relationship to them
	<input checked="" type="checkbox"/> MARRIED	<u>0</u>	
<input type="checkbox"/> WIDOWED			
<input type="checkbox"/> SEPARATED OR DIVORCED			
DEBTS & MONTHLY BILLS	APARTMENT OR HOME		
	Creditors		
	Home Truck Car Credit Cards	National City Mortgage Compass Bank Visa - MC -	Total Debt <u>\$ 98000</u> <u>\$ 29000</u> <u>\$ 10000</u> Monthly Payt. <u>\$ 700</u> <u>\$ 580</u> <u>\$ 260</u> \$ _____
(LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)			

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) _____

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)